SERFF Tracking Number: LFSC-126556623 State: Arkansas
Filing Company: LifeSecure Insurance Company State Tracking Number: 45270

Company Tracking Number: ADV-LS-0378A ST 03/10

TOI: LTC031 Individual Long Term Care Sub-TOI: LTC031.001 Qualified

Product Name: Multi-Life Proposals

Project Name/Number:

#### Filing at a Glance

Company: LifeSecure Insurance Company

Product Name: Multi-Life Proposals

SERFF Tr Num: LFSC-126556623 State: Arkansas

TOI: LTC03I Individual Long Term Care

SERFF Status: Closed-Filed State Tr Num: 45270

Sub-TOI: LTC03I.001 Qualified Co Tr Num: ADV-LS-0378A ST State Status: Closed

03/10

Filing Type: Advertisement Reviewer(s): Marie Bennett

Authors: Sue Howard, Judy Lucas, Disposition Date: 04/14/2010

Karilynn Bagnell

Date Submitted: 03/26/2010 Disposition Status: Filed

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

#### **General Information**

Project Name: Status of Filing in Domicile: Pending

Project Number:

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Filing Status Changed: 04/14/2010 Explanation for Other Group Market Type:

State Status Changed: 04/14/2010

Deemer Date: Created By: Karilynn Bagnell

Submitted By: Karilynn Bagnell Corresponding Filing Tracking Number: LFSC-

126069511

Filing Description:

LifeSecure Insurance Company - NAIC #77720

Multi-Life Proposals

Previously Approved Forms: LS-0378A ST 08/09; LS-0378B ST 08/09

Attached for your review and approval are new advertising materials. These forms are new and intended to replace existing forms approved in your state, (Corresponding Tracking # above).

The changes to these forms are as follows:

SERFF Tracking Number: LFSC-126556623 State: Arkansas
Filing Company: LifeSecure Insurance Company State Tracking Number: 45270

Company Tracking Number: ADV-LS-0378A ST 03/10

TOI: LTC031 Individual Long Term Care Sub-TOI: LTC031.001 Qualified

Product Name: Multi-Life Proposals

Project Name/Number: /

#### LS-0378A ST 03/10

- 1. Added "Discount" row on page 2
- 2. Changed "marital" to "couple's" on footnotes, page 4 (page 3 for "B" version)
- 3. Changed first sentence in Spouse or Domestic Partner Discounts paragraph to: "If you and your spouse or domestic partner both apply and policies are issued...."
- 4. Changed form number to 03/10

#### LS-0378B ST 03/10

- 1. Same changes as the "A" version
- 2. Added bracketed single and double dagger symbols next to Eligible Participants on page 2
- 3. Added single and double dagger footnotes on page 3

We have included a statement of variability for these forms.

If you have any questions or need any additional information, please contact me at (810) 220-4644 or kbagnell@lifesecureltc.com.

Karilynn Bagnell

Senior Compliance Specialist

### **Company and Contact**

#### **Filing Contact Information**

Karilynn Bagnell, Senior Compliance Specialist kbagnell@lifesecureltc.com

LifeSecure Insurance Company 810-220-8774 [Phone] 10559 Citation Drive 810-220-7707 [FAX]

Suite 300

Brighton, MI 48116

#### **Filing Company Information**

LifeSecure Insurance Company CoCode: 77720 State of Domicile: Michigan 10559 Citation Drive Group Code: 572 Company Type: Life, A & H

Suite 300 Group Name: BCBS of MI GRP State ID Number:

Brighton, MI 48116 FEIN Number: 75-0956156

(810) 220-8774 ext. [Phone]

-----

# Filing Fees

SERFF Tracking Number: LFSC-126556623 State: Arkansas

Filing Company: LifeSecure Insurance Company State Tracking Number: 45270

Company Tracking Number: ADV-LS-0378A ST 03/10

TOI: LTC031 Individual Long Term Care Sub-TOI: LTC031.001 Qualified

Product Name: Multi-Life Proposals

Project Name/Number: /

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No

Fee Explanation: \$50.00 per advertising filling

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

LifeSecure Insurance Company \$50.00 03/26/2010 35184013 LifeSecure Insurance Company \$50.00 04/01/2010 35307392

Company Tracking Number: ADV-LS-0378A ST 03/10

TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified

Product Name: Multi-Life Proposals

Project Name/Number:

### **Correspondence Summary**

#### **Dispositions**

	Status Created By		Created On		Date Submitted		
Filed Marie Bennett Filing Notes		04/14/2010		04/14/2010			
	Subject		Note Type		Created By	Created On	Date Submitted
	Filing Fee		Note To Reviewe	r	Karilynn Bagnell	04/01/2010	0 04/01/2010
	FILING FEES	3	Note To Filer		Marie Bennett	03/31/2010	0 03/31/2010

Company Tracking Number: ADV-LS-0378A ST 03/10

TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified

Product Name: Multi-Life Proposals

Project Name/Number: /

### **Disposition**

Disposition Date: 04/14/2010

Implementation Date:

Status: Filed Comment:

Rate data does NOT apply to filing.

Company Tracking Number: ADV-LS-0378A ST 03/10

TOI: LTC031 Individual Long Term Care Sub-TOI: LTC031.001 Qualified

Product Name: Multi-Life Proposals

Project Name/Number: /

Schedule Schedule Item Status Public Access

Supporting DocumentStatement of VariabilityYesFormMultiLife Employer Proposal-All AgesYesFormMultiLife Employer Proposal-CensusYes

SERFF Tracking Number: LFSC-126556623 State: Arkansas

Filing Company: LifeSecure Insurance Company State Tracking Number: 45270

Company Tracking Number: ADV-LS-0378A ST 03/10

TOI: LTC031 Individual Long Term Care Sub-TOI: LTC031.001 Qualified

Product Name: Multi-Life Proposals

Project Name/Number: /

**Note To Reviewer** 

Created By:

Karilynn Bagnell on 04/01/2010 07:36 AM

Last Edited By:

Marie Bennett

Submitted On:

04/14/2010 01:16 PM

Subject:

Filing Fee

Comments:

Have submitted the required additional fee of \$50.00.

Company Tracking Number: ADV-LS-0378A ST 03/10

TOI: LTC031 Individual Long Term Care Sub-TOI: LTC031.001 Qualified

Product Name: Multi-Life Proposals

Project Name/Number: /

**Note To Filer** 

Created By:

Marie Bennett on 03/31/2010 03:02 PM

Last Edited By:

Marie Bennett

Submitted On:

04/14/2010 01:16 PM

Subject:

**FILING FEES** 

**Comments:** 

EFFECTIVE 1/1/10. AR RULE 57, SEC 5, SSEC 11, REQUIRES A FILING FEE OF \$50.00 PER ADVERTISEMENT AND/OR FORM. THE FILE WILL BE HELD PENDING THE BALANCE OF THE FEE.

Company Tracking Number: ADV-LS-0378A ST 03/10

TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified

Product Name: Multi-Life Proposals

Project Name/Number: /

#### Form Schedule

Lead Form Number: LS-0378A ST 03/10

Schedule	Form	Form Type Form Name	Action	Action Specific	Readability	Attachment
Item	Number			Data		
Status						
	LS-0378A	Advertising MultiLife Employer	Initial			LS-0378A ST
	ST 03/10	Proposal-All Ages				03 10-
						Employer
						Proposal PDF
						- All Ages
						Version.pdf
	LS-0378B	Advertising MultiLife Employer	Initial			LS-0378B ST
	ST 03/10	Proposal-Census				03 10-
						Employer
						Proposal PDF
						- Census
						Version.pdf

### LifeSecure Insurance Company

# Multi-Life Proposal for Long Term Care Insurance









Prepared for: [Employer/Association Name]

Prepared by: [Agent Name]

[Agent Address]

[Agent Phone]

Date: [XX/XX/XXXX]

Rates quoted are for use in the state of [state name].

Premiums are subject to change.

LS-0378A ST 03/10 1 of 6

# **Multi-Life Proposal for Long Term Care Insurance**



Plan Choice	<b>Plan A</b> [*]	Plan B [*]	Plan C [*]
Benefit Bank <sup>sм</sup> Amount	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
Monthly Benefit Access	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
Benefit Wait Period	90 Calendar Days	90 Calendar Days	90 Calendar Days
Inflation Protection Option	[Guaranteed Future Purchase Offers] [Automatic 5% Compound] [Automatic 3% Compound]	[Guaranteed Future Purchase Offers] [Automatic 5% Compound] [Automatic 3% Compound]	[Guaranteed Future Purchase Offers] [Automatic 5% Compound] [Automatic 3% Compound]
Money-Back Promise <sup>SM</sup> Option	[Included] [Excluded]	[Included] [Excluded]	[Included] [Excluded]
Lapse Protection Benefit	[Included] [Excluded]	[Included] [Excluded]	[Included] [Excluded]
Premium Payment Option	[Lifetime] [10-Year] [To-Age-65]	[Lifetime] [10-Year] [To-Age-65]	[Lifetime] [10-Year] [To-Age-65]
Employer Contribution Discount	[5%]	[5%]	[5%]
Discount	[5%]	[5%]	[5%]

### **Monthly Premium Amount**

		,	
Age			
18—30	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
31	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
32	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
33	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
34	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
35	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
36	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
3 <i>7</i>	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
38	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
39	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
40	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
41	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
42	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
43	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
44	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]

LS-0378A ST 03/10 2 of 6

	Plan A [*]	Plan B [*]	Plan C [*]
	Mont	hly Premium Am	ount
Age			
45	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
46	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
47	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
48	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
49	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
50	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
51	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
52	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
53	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
54	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
55	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
56	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
57	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
58	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
59	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
60	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
61	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
62	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
63	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
64	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
65	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
66	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
67	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
68	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
69	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
70	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
<i>7</i> 1	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
72	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
<i>7</i> 3	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]
74	[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]

Rates for ages 75-84 available upon request.

LS-0378A ST 03/10 3 of 6

<sup>[ \*</sup> This plan is Partnership-qualified in the state of [state name].]

The premiums shown above are for illustrative purposes only. [These monthly premiums include an employer contribution discount percentage as shown above.] A spouse/domestic partner or couple's discount may also apply to individual applicants. Each applicant must complete an Application and must qualify for coverage based on LifeSecure's underwriting criteria, which includes an applicant's age, health history and current health conditions. This proposal is valid for individuals ages 18–84 submitting applications for LifeSecure's individual long term care insurance in the state of [state name].

The premiums shown above are based on LifeSecure's 'Preferred' rate class and are for illustrative purposes only. An applicant's actual premium rate class will be based on his/her own age, health history, current health conditions and other underwriting criteria. A spouse/domestic partner or couple's discount may also apply to individual applicants. Each applicant must complete an Application and must qualify for coverage based on LifeSecure's underwriting criteria. This proposal is valid for individuals ages 18–84 submitting applications for LifeSecure's individual long term care insurance in the state of [state name].

Any premium paid Monthly Direct-Bill by an individual will include an additional \$2.00 service fee. This service fee is *not* applicable for Monthly Employer List-Billing cases.

LS-0378A ST 03/10 4 of 6

# Plan Summary for Long Term Care Insurance



#### Benefit Bank

Your Benefit Bank represents the lifetime dollar benefit amount available to you. Your Benefit Bank balance is reduced by any benefits paid to you or on your behalf.

#### **Monthly Benefit Access Limit**

Your Monthly Benefit Access Limit represents the dollar benefit amount available on a monthly basis for your long term care needs. The original dollar amount is calculated as a percentage of your Benefit Bank.

Benefit Payout Structure. When you become eligible for benefits, we will reimburse you for covered expenses for qualified long term care services up to your full Monthly Benefit each calendar month. These covered expenses include care at home through a home care agency or independent provider, or in an assisted living facility, adult day care center or in a nursing home. Hospice care is also covered.

If you do not incur covered expenses up to your full Monthly Benefit for a given calendar month, 50% of your unused monthly benefit will be available to you as a Flexible Benefit. The Flexible Benefit is not restricted by the definition of covered expenses. This benefit is designed to provide greater flexibility in the types of care, services and products available to you under this policy, such as: care provided by a family member or other informal caregiver, construction of a wheelchair access ramp, or installation of grab bars in your bathroom.

#### **Guaranteed Future Purchase Offers**

Under the Guaranteed Future Purchase Offers, you will be offered the opportunity to increase your current Benefit Bank and Monthly Benefit by 15% every three years. You may accept each offer without submitting evidence of insurability.

#### **Waiver of Premium**

Your premiums are waived beginning on the first day you start receiving benefits. As long as you continue to receive benefits, additional premiums will not be required. Premium payments will again be required after 30 days of not receiving benefits.

#### **Benefit Wait Period**

You are eligible to begin receiving benefits upon completion of a 90-day Benefit Wait Period. This is a period of time during which you meet the benefit triggers for this coverage. You do not need to be receiving paid services in order to accumulate Benefit Wait Period days, and your Benefit Wait Period need only be met once during your lifetime.

#### LifeSecure Care Advisor Services

A LifeSecure Care Advisor is available to you and your family from the day you receive your policy. The LifeSecure Care Advisor can help you with everything from long term care questions to recommendations for assisted living facilities to arrangements for personal care or services. The use of these services is optional and is provided at no cost to you.

LS-0378A ST 03/10 5 of 6

#### **Spouse or Domestic Partner Discounts**

If you and your spouse or domestic partner both apply and the policies are issued, a 30% premium discount will apply to both policies. If your spouse or domestic partner does not apply, or the policy is not issued, a 10% discount will still apply to your policy.

# **Money-Back Promise Option**

If you die while your policy is in force for 5 or more years, a percentage of the premiums (less benefits paid) is refunded to a beneficiary. The percentage of payback equals 25% of the premiums paid if death occurs in policy years 5–9; 50% in years 10–14; and 75% in years 15 and beyond. Your policy must be in force at the time of death for the Money–Back Promise Option benefits to be payable.

#### **Automatic 3% Compound Inflation Protection Benefit**

We will automatically increase your current Monthly Benefit and your remaining Benefit Bank by 3% each year. The increase will be effective on each anniversary of your policy effective date, even while you are receiving benefits.

#### **Automatic 5% Compound Inflation Protection Benefit**

We will automatically increase your current Monthly Benefit and your remaining Benefit Bank by 5% each year. The increase will be effective on each anniversary of your policy effective date, even while you are receiving benefits.

#### **Lapse Protection Benefit**

If your policy is in force for at least three full years, and then terminates due to non-payment of premium, this benefit allows you to retain a reduced paid-up amount of coverage. You will have a revised Benefit Bank equal to the greater of: (a) 100% of the sum of all premiums paid; or (b) one times your Monthly Benefit. The revised Benefit Bank is reduced by any benefits previously paid.

#### **Policy Limitations and Exclusions**

Charges for care or services provided by a family member, as well as care or services for which no charge is made in the absence of insurance, are excluded under the reimbursable covered expenses portion of the policy. However, such care or services may be payable under the Flexible Benefit.

No benefits, including the Flexible Benefit, will be payable under this Policy for: a loss that occurs while this Policy is not in force; or an illness, treatment or medical condition that is due to war or act of war, whether declared or not; or an illness, treatment or medical condition that results from an attempt of suicide (while sane or insane) or an intentionally self-inflicted injury; or expenses for treatment or rehabilitation related to alcoholism or drug addictions; or expenses for services or items to the extent that such expenses are reimbursable under Medicare, or would be so reimbursable but for the application of a deductible or coinsurance amount; or care or services, unless otherwise required by law, for which benefits are duplicated or provided under a governmental program (except Medicaid), any state or federal workers' compensation, employer's liability or occupational disease law, or any motor vehicle no-fault law; or care or services provided outside the United States of America, its territories or possessions, or Canada.

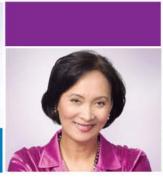
LifeSecure and the circular logo are trademarks of LifeSecure Insurance Company – Brighton, MI 48116. Our long term care insurance product is underwritten by LifeSecure Insurance Company. This flyer is for illustrative purposes only and is not a contract. It is intended only to provide a general overview of our product and services. Availability of benefits, amounts, options and discounts may vary by state. Please remember only the insurance policy can give actual coverage amounts, terms, conditions, limitations and exclusions. Refer also to the Outline of Coverage. Policy Form Series: LS-0002.

LS-0378A ST 03/10 6 of 6

### LifeSecure Insurance Company

# Multi-Life Proposal for Long Term Care Insurance









Prepared for: [Employer/Association Name]

Prepared by: [Agent Name]

[Agent Address]

[Agent Phone]

Date: [XX/XX/XXXX]

Rates quoted are for use in the state of [state name].

Premiums are subject to change.

LS-0378B ST 03/10 1 of 5

# **Multi-Life Proposal for Long Term Care Insurance**



Plan Choice		Plan A [*]	Plan B [*]	Plan C [*]	
Benefit Bank <sup>sM</sup> Amount		[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]	
<b>Monthly Benefit Access</b>		[\$xxx.xx]	[\$xxx.xx]	[\$xxx.xx]	
Benefit Wait Period		90 Calendar Days	90 Calendar Days	90 Calendar Days	
Inflation Protection Option		[Guaranteed Future Purchase Offers] [Automatic 5% Compound] [Automatic 3% Compound]	[Guaranteed Future Purchase Offers] [Automatic 5% Compound] [Automatic 3% Compound]	[Guaranteed Future Purchase Offers] [Automatic 5% Compound] [Automatic 3% Compound]	
Money-Back Promise <sup>SM</sup> Option		[Included] [Excluded]	[Included] [Excluded]	[Included] [Excluded]	
Lapse Protection Benefit		[Included] [Excluded]	[Included] [Excluded]	[Included] [Excluded]	
Premium Payment Option		[Lifetime] [10-Year] [To-Age-65]	[Lifetime] [10-Year] [To-Age-65]	[Lifetime] [10-Year] [To-Age-65]	
Employer Contribution Discount		[5%]	[5%]	[5%]	
Discount		[5%]	[5%]	[5%]	
Eligible Participants	Age	Monthly Premium Amount Age			
[FName, LName] [†] [††]  TOTAL MONTHLY PREMIUM Average Monthly per Participant  TOTAL ANNUAL PREMIUM Average Annual per Participant	[42] [35] [59] [40] [32] [61]	[\$12.56] [\$9.86] [\$43.21] [\$12.00] [\$8.76] [\$45.89] [\$793.68] [\$22.05] [\$9,524.16] [\$264.56]	[\$13.69] [\$10.58] [\$46.11] [\$14.25] [\$9.98] [\$49.74] [ <b>\$866.10</b> ] [\$24.06] [ <b>\$10,393.20</b> ] [\$288.70]	[\$16.33] [\$14.31] [\$52.97] [\$17.11] [\$12.36] [\$54.09] [\$1,003.02] [\$27.86] [\$12,036.24] [\$334.34]	

LS-0378B ST 03/10 2 of 5

The premiums shown above are for illustrative purposes only. [These monthly premiums include an employer contribution discount percentage as shown above.] A spouse/domestic partner or couple's discount may also apply to individual applicants. Each applicant must complete an Application and must qualify for coverage based on LifeSecure's underwriting criteria, which includes an applicant's ages 18–84 submitting applications for LifeSecure's individual long term care insurance in the state of [state name].

The premiums shown above are based on LifeSecure's 'Preferred' rate class and are for illustrative purposes only. An applicant's actual premium rate class will be based on his/her own age, health history, current health conditions and other underwriting criteria. A spouse/domestic partner or couple's discount may also apply to individual applicants. Each applicant must complete an Application and must qualify for coverage based on LifeSecure's underwriting criteria. This proposal is valid for individuals ages 18–84 submitting applications for LifeSecure's individual long term care insurance in the state of [state name].

Any premium paid Monthly Direct-Bill by an individual will include an additional \$2.00 service fee. This service fee is *not* applicable for Monthly Employer List-Billing cases.

†	These monthly premiums, as illustrated, include a 10% spouse/domestic partner discount.
— ††	These monthly premiums, as illustrated, include a 30% couple's discount (assuming that both spouses/domestic partners apply for coverage and policies are issued). Note: if one spouse/domestic partner does not apply or the policy is not issued, a 10% spouse/domestic partner discount will apply to the other's policy.

LS-0378B ST 03/10 3 of 5

# Plan Summary for Long Term Care Insurance



#### Benefit Bank

Your Benefit Bank represents the lifetime dollar benefit amount available to you. Your Benefit Bank balance is reduced by any benefits paid to you or on your behalf.

#### **Monthly Benefit Access Limit**

Your Monthly Benefit Access Limit represents the dollar benefit amount available on a monthly basis for your long term care needs. The original dollar amount is calculated as a percentage of your Benefit Bank.

Benefit Payout Structure. When you become eligible for benefits, we will reimburse you for covered expenses for qualified long term care services up to your full Monthly Benefit each calendar month. These covered expenses include care at home through a home care agency or independent provider, or in an assisted living facility, adult day care center or in a nursing home. Hospice care is also covered.

If you do not incur covered expenses up to your full Monthly Benefit for a given calendar month, 50% of your unused monthly benefit will be available to you as a Flexible Benefit. The Flexible Benefit is not restricted by the definition of covered expenses. This benefit is designed to provide greater flexibility in the types of care, services and products available to you under this policy, such as: care provided by a family member or other informal caregiver, construction of a wheelchair access ramp, or installation of grab bars in your bathroom.

#### **Guaranteed Future Purchase Offers**

Under the Guaranteed Future Purchase Offers, you will be offered the opportunity to increase your current Benefit Bank and Monthly Benefit by 15% every three years. You may accept each offer without submitting evidence of insurability.

#### **Waiver of Premium**

Your premiums are waived beginning on the first day you start receiving benefits. As long as you continue to receive benefits, additional premiums will not be required. Premium payments will again be required after 30 days of not receiving benefits.

#### **Benefit Wait Period**

You are eligible to begin receiving benefits upon completion of a 90-day Benefit Wait Period. This is a period of time during which you meet the benefit triggers for this coverage. You do not need to be receiving paid services in order to accumulate Benefit Wait Period days, and your Benefit Wait Period need only be met once during your lifetime.

#### LifeSecure Care Advisor Services

A LifeSecure Care Advisor is available to you and your family from the day you receive your policy. The LifeSecure Care Advisor can help you with everything from long term care questions to recommendations for assisted living facilities to arrangements for personal care or services. The use of these services is optional and is provided at no cost to you.

LS-0378B ST 03/10 4 of 5

#### **Spouse or Domestic Partner Discounts**

If you and your spouse or domestic partner both apply and the policies are issued, a 30% premium discount will apply to both policies. If your spouse or domestic partner does not apply, or the policy is not issued, a 10% discount will still apply to your policy.

## Money-Back Promise Option

If you die while your policy is in force for 5 or more years, a percentage of the premiums (less benefits paid) is refunded to a beneficiary. The percentage of payback equals 25% of the premiums paid if death occurs in policy years 5–9; 50% in years 10–14; and 75% in years 15 and beyond. Your policy must be in force at the time of death for the Money–Back Promise Option benefits to be payable.

#### **Automatic 3% Compound Inflation Protection Benefit**

We will automatically increase your current Monthly Benefit and your remaining Benefit Bank by 3% each year. The increase will be effective on each anniversary of your policy effective date, even while you are receiving benefits.

#### **Automatic 5% Compound Inflation Protection Benefit**

We will automatically increase your current Monthly Benefit and your remaining Benefit Bank by 5% each year. The increase will be effective on each anniversary of your policy effective date, even while you are receiving benefits.

#### **Lapse Protection Benefit**

If your policy is in force for at least three full years, and then terminates due to non-payment of premium, this benefit allows you to retain a reduced paid-up amount of coverage. You will have a revised Benefit Bank equal to the greater of: (a) 100% of the sum of all premiums paid; or (b) one times your Monthly Benefit. The revised Benefit Bank is reduced by any benefits previously paid.

#### **Policy Limitations and Exclusions**

Charges for care or services provided by a family member, as well as care or services for which no charge is made in the absence of insurance, are excluded under the reimbursable covered expenses portion of the policy. However, such care or services may be payable under the Flexible Benefit.

No benefits, including the Flexible Benefit, will be payable under this Policy for: a loss that occurs while this Policy is not in force; or an illness, treatment or medical condition that is due to war or act of war, whether declared or not; or an illness, treatment or medical condition that results from an attempt of suicide (while sane or insane) or an intentionally self-inflicted injury; or expenses for treatment or rehabilitation related to alcoholism or drug addictions; or expenses for services or items to the extent that such expenses are reimbursable under Medicare, or would be so reimbursable but for the application of a deductible or coinsurance amount; or care or services, unless otherwise required by law, for which benefits are duplicated or provided under a governmental program (except Medicaid), any state or federal workers' compensation, employer's liability or occupational disease law, or any motor vehicle no-fault law; or care or services provided outside the United States of America, its territories or possessions, or Canada.

LifeSecure and the circular logo are trademarks of LifeSecure Insurance Company – Brighton, MI, 48116. Our long term care insurance product is underwritten by LifeSecure Insurance Company. This flyer is for illustrative purposes only and is not a contract. It is intended only to provide a general overview of our product and services. Availability of benefits, amounts, options and discounts may vary by state. Please remember only the insurance policy can give actual coverage amounts, terms, conditions, limitations and exclusions. Refer also to the Outline of Coverage. Policy Form Series: LS-0002.

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Company Tracking Number: ADV-LS-0378A ST 03/10

TOI: LTC031 Individual Long Term Care Sub-TOI: LTC031.001 Qualified

Product Name: Multi-Life Proposals

Project Name/Number:

### **Supporting Document Schedules**

Item Status: Status

Date:

Satisfied - Item: Statement of Variability

Comments:

**Attachments:** 

LS-0378A ST 03 10\_ Employer Proposal PDFAll Ages Statement of Variability.pdf LS-0378B ST 03 10\_Employer Proposal PDF Census Statement of Variability.pdf

#### **EXPLANATION OF VARIABILITY**

# LIFESECURE MULTI-LIFE PROPOSAL FOR LONG TERM CARE INSURANCE "LIST" VERSION (LS-0378A ST 03/10)

#### Page 1

- The following bracketed items will be populated with information specific to the multi-life employer/association receiving the quote:
  - o Employer/Association name
  - o Agent Name
  - Agent Address
  - o Agent Phone
  - o Date
  - o State Name

#### Page 2

- In Row 1, the asterisk(s) beside Plan A, B and/or C and corresponding footnote at bottom of list will **only** appear if:
  - a. the state offers partnership;
  - b. LifeSecure Insurance Company's product is approved for partnership in the state; and
  - c. the plan design being quoted is partnership-qualified.

The footnote will appear if at least one of the plan designs being quoted is partnership-qualified. The "state name" in footnote will match state name on page 1.

- In Benefit Bank<sup>SM</sup> Amount and Monthly Benefit Access rows, amounts will vary.
- In **Inflation Protection Option** row, each plan design will display one of the following items:
  - Guaranteed Future Purchase Offers
  - Automatic 5% Compound
  - Automatic 3% Compound
- The following Optional Benefits will appear in proposal **only** if included in at least one of the three plan design quoted:
  - Money-Back Promise<sup>SM</sup> Option
    - If appearing on proposal, each plan design will display either:
      - Included
      - Excluded
  - Lapse Protection Benefit
    - If appearing on proposal, each plan design will display either:
      - Included
      - Excluded
  - Employer Contribution Discount
    - If the multi-life group qualifies for discount, row will display with 5% in all columns.
  - Discount
    - If an association or non-employer group qualifies for a discount, row will display 5% in all columns.

- In the Premium Payment Option row, one of the following options will appear for each plan design being quoted:
  - Lifetime
  - o 10-Year
  - o To-Age-65

#### Page 2 & 3

Premium amounts will vary, based on age and plan design.

#### Page 4

The following footnote will appear for groups that qualify for the LifeSecure multi-life program:

The premiums shown above are for illustrative purposes only. [These monthly premiums include an employer contribution discount percentage as shown above.] A spouse/domestic partner or couple's discount may also apply to individual applicants. Each applicant must complete an Application and must qualify for coverage based on LifeSecure's underwriting criteria, which includes an applicant's age, health history and current health conditions. This proposal is valid for individuals ages 18--84 submitting applications for LifeSecure's individual long term care insurance in the state of [state name].

(The "state name" in footnote will match state name on page 1.)

The following footnote will appear for groups that **do not** qualify for the LifeSecure multi-life program: The premiums shown above are based on LifeSecure's 'Preferred' rate class and are for illustrative purposes only. An applicant's actual premium rate class will be based on his/her own age, health history, current health conditions and other underwriting criteria. A spouse/domestic partner or couple's discount may also apply to individual applicants. Each applicant must complete an Application and must qualify for coverage based on LifeSecure's underwriting criteria. This proposal is valid for individuals ages 18--84 submitting applications for LifeSecure's individual long term care insurance in the state of [state name].

(The "state name" in footnote will match state name on page 1.)

#### Page 5

The **Guaranteed Future Purchase Offers** paragraph will only appear if this feature is included in one of the plan designs being quoted.

#### Page 6

The following paragraphs will only appear if the option is included in one of the plan designs being quoted.

- Money-Back Promise<sup>SM</sup> Option
- Automatic 3% Compound Inflation Protection Benefit
- Automatic 5% Compound Inflation Protection Benefit
- Lapse Protection Benefit

#### **EXPLANATION OF VARIABILITY**

# LIFESECURE MULTI-LIFE PROPOSAL FOR LONG TERM CARE INSURANCE "CENSUS" VERSION (LS-0378B ST 03/10)

#### Page 1

- The following bracketed items will be populated with information specific to the multi-life employer/association receiving the quote:
  - o Employer/Association name
  - o Agent Name
  - Agent Address
  - o Agent Phone
  - o Date
  - State Name

#### Page 2

- In Row 1, the asterisk(s) beside Plan A, B and/or C and corresponding footnote at bottom of list will **only** appear if:
  - a. the state offers partnership;
  - b. LifeSecure Insurance Company's product is approved for partnership in the state; and
  - c. the plan design being quoted is partnership-qualified.

The footnote will appear if at least one of the plan designs being quoted is partnership-qualified. The "state name" in footnote will match state name on page 1.

- In Benefit Bank<sup>SM</sup> Amount and Monthly Benefit Access rows, amounts will vary.
- In **Inflation Protection Option** row, each plan design will display one of the following items:
  - Guaranteed Future Purchase Offers
  - Automatic 5% Compound
  - Automatic 3% Compound
- The following Optional Benefits will appear in proposal only if included in at least one of the three plan design quoted:
  - Money-Back Promise<sup>SM</sup> Option
    - If appearing on proposal, each plan design will display either:
      - Included
      - Excluded
  - Lapse Protection Benefit
    - If appearing on proposal, each plan design will display either:
      - Included
      - Excluded
  - Employer Contribution Discount
    - If the multi-life group qualifies for discount, row will display with 5% in all columns.
  - o Discount
    - If an association or non-employer group qualifies for a discount, row will display 5% in all columns.

- In the Premium Payment Option row, one of the following options will appear for each plan design being quoted:
  - o Lifetime
  - o 10-Year
  - o To-Age-65
- The following items will vary:
  - Names of eligible participants
  - Ages of eligible participants
  - Monthly premium amounts (based on age and plan design)
  - Total monthly premium amounts
  - Average monthly premium amounts
  - Total annual premium amounts
  - Average annual premium amounts
- The dagger(s) beside the names of Eligible Participants and corresponding footnote(s) on page 3 will only appear if:
  - The agent indicates that the participant may be eligible for the 10% Spouse/Domestic Partner discount

OR

The agent indicates that the participant may be eligible for the 30% Couple's discount

The footnote(s) will appear if at least one eligible participant on the census quoted may be eligible for one of the discounts listed above.

#### Page 3

The following footnote will appear for groups that qualify for the LifeSecure multi-life program:

The premiums shown above are for illustrative purposes only. [These monthly premiums include an employer contribution discount percentage as shown above.] A spouse/domestic partner or couple's discount may also apply to individual applicants. Each applicant must complete an Application and must qualify for coverage based on LifeSecure's underwriting criteria, which includes an applicant's age, health history and current health conditions. This proposal is valid for individuals ages 18--84 submitting applications for LifeSecure's individual long term care insurance in the state of [state name].

(The "state name" in footnote will match state name on page 1.)

The following footnote will appear for groups that **do not** qualify for the LifeSecure multi-life program: The premiums shown above are based on LifeSecure's 'Preferred' rate class and are for illustrative purposes only. An applicant's actual premium rate class will be based on his/her own age, health history,

current health conditions and other underwriting criteria. A spouse/domestic partner or couple's discount may also apply to individual applicants. Each applicant must complete an Application and must qualify for coverage based on LifeSecure's underwriting criteria. This proposal is valid for individuals ages 18--84 submitting applications for LifeSecure's individual long term care insurance in the state of [state name].

(The "state name" in footnote will match state name on page 1.)

The following footnote will appear if at least one eligible participant on the census quoted may be eligible for the Spouse/Partner discount:

† These monthly premiums, as illustrated, include a 10% spouse/domestic partner discount.

The following footnote will appear if at least one eligible participant on the census quoted may be eligible for the Couple's discount:

†† These monthly premiums, as illustrated, include a 30% couple's discount (assuming that both spouses/domestic partners apply for coverage and policies are issued). Note: if one spouse/domestic partner does not apply or the policy is not issued, a 10% spouse/domestic partner discount will apply to the other's policy.

#### Page 4

The **Guaranteed Future Purchase Offers** paragraph will only appear if this feature is included in one of the plan designs being quoted.

#### Page 5

The following paragraphs will only appear if the option is included in one of the plan designs being quoted.

- Money-Back Promise<sup>SM</sup> Option
- Automatic 3% Compound Inflation Protection Benefit
- Automatic 5% Compound Inflation Protection Benefit
- Lapse Protection Benefit